

Summer Camp Information Form

Name of child: _____

DOB: ____/____/____ Address: _____

Parent/Guardian 1: _____ Relationship: _____

Phone 1: (____) _____ - _____ Phone 2: (____) _____ - _____

Parent/Guardian 2: _____ Relationship: _____

Phone 1: (____) _____ - _____ Phone 2: (____) _____ - _____

E-mail: _____ T-shirt Size: Youth/Adult S M L XL

Additional person(s) permitted to pick up child/ Emergency contacts:

Name: _____ Phone: (____) ____ - ____ Relationship: _____

Name: _____ Phone: (____) ____ - ____ Relationship: _____

Can your child swim? ☐ Yes ☐ No ☐ Must have lifejacket*

*If your child needs a life jacket please provide one with child's name on Tuesdays and Fridays

Does child have any known food allergies? ☐ Yes ☐ No

If YES, list: _____

Does child have any medical conditions? ☐ Yes ☐ No

If YES, list: _____

Is child currently on any medications? ☐ Yes ☐ No

If YES, list: _____

If YES, will child be taking medication during event hours*? ☐ Yes ☐ No

*Please send medication with child's name and dosage to the Camp Director

If YES, does medication need to be administered? ☐ Yes ☐ No

If YES, what time and dosage? ____:____ ☐ a.m. ☐ p.m. ____ dosage(s)

Additional information if needed:

Summer Camp Sign-up Form

Name of child: _____ Sex: M F

Please check the session(s) you would like to sign up for:

20% deposit required for each session, if not paid in full. Remaining balance is due on the Monday two weeks prior to the first day of each session.

Deposit is: \$30/Resident or \$37/Non Resident for regular day
\$36/Resident or \$45/Non Resident for extended day.

☐ Paid in Full ☐ 20% Deposit Amount Paid: _____ Date: _____

Reg. or Ext. Day	Please check	Session	Date	Field Trip (<i>subject to change</i>)	Reg. Code
		1	June 8-12	Space Center Houston	9681
		2	June 15-19	Children's Museum	9682
		3	June 22-26	Texas Rock Gym	9683
		4	June 29-July 2*	Downtown Aquarium	9684
		5	July 6-10	Sky Zone	9685
		6	July 13-17	Moody Gardens	9686
		7	July 20-24	Sugar Land Ice	9687
		8	July 27-31	Houston Zoo	9688
		9	Aug. 3-7	Schlitterbahn	9689
		10	Aug. 20-14	Oil Ranch	9690
		11	Aug. 17-21	Museum of Natural Science	9691

**No camp July 3rd in observance of Independence Day*

By signing this document I, _____, as parent/guardian or the registering responsible party for said camper hereby acknowledges that I have submitted any and all pertinent information relative to the health, safety, welfare and expressed desires as related to said camper's Sugar Land Day Camp experience. I give my permission for my minor child to be photographed and understand that the photograph may be used by the City of Sugar Land with the understanding that the City will not profit from its use. I also hereby acknowledge that I have read the Day Camp Parent Handbook in full, and agree to abide by all guidelines set forth and hold harmless and indemnify The City of Sugar Land and the Sugar Land Day Camp and release both from all liability. Should I or said camper fail to adhere to the guidelines set herein, I understand that the City of Sugar Land, the City of Sugar Land Parks & Recreation Department and representatives thereof have the right to void any registration and dismiss said camper from attending any further camp sessions and/or other offerings from the City of Sugar Land Parks & Recreation Department, the severity of ramifications due to a failure to adhere to guidelines set forth to be determined by the City of Sugar Land Parks and Recreation Department and it's representatives.

Signature: _____ Date: _____